

# Kentucky Teachers' Retirement System

479 Versailles Rd, Frankfort, KY 40601-3800

## Medicare Eligible Health Plan (MEHP) Enrollment

### RE: KTRS Retiree/Spouse Turning Age 65

Our records indicate that you will be turning 65 in the next several months. As of the first day of the month that you reach your 65<sup>th</sup> birthday you will no longer be eligible for the Kentucky Employees Health Plan and you **must** obtain Medicare to continue coverage through KTRS.

Contact Social Security to enroll in Medicare approximately three months before your birth month. See section below regarding enrolling in Medicare. You will be required to provide documentation verifying your Medicare enrollment before the first day of your birth month. **Complete the enclosed Medicare Information Form, attach a copy of your Medicare card, and submit them to this office to be considered for Medicare Eligible Health Plan (MEHP) coverage.** Upon receipt of the completed Medicare Information Form verifying your Medicare enrollment, KTRS will enroll you in the MEHP on the first day of your birth month. In the event that proof of your Medicare Part B coverage is not provided to KTRS before the first day of your birth month, you will not be enrolled in this coverage through KTRS. You will be eligible to enroll during the next open enrollment by providing proof of Medicare Part B coverage and submitting an enrollment form to this office no later than December 31 for an effective date of January 1. Outside of open enrollment, you will be eligible to enroll within 30 days of obtaining Part B of Medicare. If you do not wish to be enrolled in the KTRS coverage, you must notify this office **in writing** by the 10<sup>th</sup> of the month **prior** to your birth month to decline the MEHP.

**ENROLLING IN MEDICARE** - Medicare is composed of several parts. Part A is hospitalization benefits, Part B is medical benefits and Part D is prescription drug benefits.

**Part A** - Most people automatically receive Part A coverage without having to pay a monthly premium to Social Security. This is because they or a spouse paid Medicare taxes while working. If you do not automatically receive Part A at no cost, you are not required to purchase it, and the KTRS plan will pay as Medicare would have paid on Part A expenses, excluding the MEHP deductibles and copayments.

**Part B** - *All* retirees/spouses must enroll in Part B and pay the required monthly premium to Social Security. The 2009 Part B premium to be paid to Social Security is \$96.40. In some cases, your Part B premium could be higher if you fail to enroll when you first become eligible. **If you fail to enroll in Part B, you will not be enrolled in the KTRS MEHP. If at any time while enrolled in the MEHP, your Part B coverage lapses, you will be terminated from the KTRS MEHP and you will be responsible for the actual cost of any claims.**

**Part D** – The Medicare Prescription Drug Plan is prescription coverage offered by private companies approved by Medicare. Most KTRS retirees/spouses will **not** find it financially beneficial to enroll in a Medicare Part D Prescription Drug Plan because the KTRS prescription drug plan is on average as good as or better than standard Medicare prescription drug coverage. However, low-income Medicare beneficiaries, or those with both Medicaid and Medicare should contact Social Security to determine if it is in their best financial interest to enroll in Medicare Part D and waive the KTRS prescription plan. If enrolled in Medicare Part D, you will not be eligible for the KTRS prescription drug coverage. **Medical** coverage can remain intact for anyone enrolled in Medicare Part D.

You can obtain additional information by contacting Social Security at 1-800-772-1213, Medicare at 1-800-633-4227, [www.medicare.gov](http://www.medicare.gov) on the web, or KTRS at 1-800-618-1687.

**YOUR KTRS MEDICAL COVERAGE** – For those enrolled in Parts A and B of Medicare, the MEHP medical plan is a Medicare Advantage Private Fee-for-Service (PFFS) plan currently administered by Humana. You may

go to any Medicare-approved doctor or hospital that accepts the plan's payment terms for covered services. Unlike many Medicare Advantage Plans, the PFFS does not have a network as with an HMO or PPO. If any of your providers are unfamiliar with the Medicare Advantage PFFS plan, please have them call Humana Provider Relations at 1-866-291-9714. If you are enrolled in both Parts A and B of Medicare, there is no need to give providers your Medicare card when receiving services. You simply show your new Humana PFFS ID card each time you receive care and providers file claims directly with Humana instead of Medicare. If you do not have Part A of Medicare, you must present your Medicare card first followed by your MEHP Humana ID card.

See the enclosed Summary of Benefits for an overview of the medical program. You will receive 2009 benefit documents from Humana, including your ID card, before your coverage is effective. Once enrolled, you can access a letter of coverage at [www.humana.com](http://www.humana.com). Also, you can access most benefit documents at [www.ktrs.ky.gov](http://www.ktrs.ky.gov). Please note: Do not enroll in another Medicare Advantage Plan without first contacting KTRS in writing to terminate the MEHP.

**YOUR KTRS PRESCRIPTION COVERAGE** – The MEHP Prescription Drug Plan is currently administered by Medco. The program consists of a Retail Drug Program and a Mail Service Drug Program. The Retail Drug Program is designed for initial and short-term prescriptions and allows up to a 30 day supply of medication to be obtained at a retail pharmacy. The Mail Service Drug Program is designed for prescriptions which are taken on a long-term basis and allows up to a 90 day supply of medication to be obtained at Medco's mail service pharmacy. See the enclosed handbook for more details regarding the prescription plan.

You should expect to receive a prescription plan ID card and benefit package around the first week of your birth month. **To avoid any possible lapse in your medication, obtain a refill through your current plan on the last day of the month prior to your birth month.** If your ID card has not arrived by the time you need to obtain a prescription, please use the retiree's unique KTRS ID number with the group number of KTRSRX1. You may also print a temporary ID card by registering on [www.medco.com](http://www.medco.com). If you need specific information regarding a prescription prior to your effective date of coverage, please contact Medco at 1-800-551-8060, choose the Open Enrollment option, and reference the blanket ID of OEKTRSRETI00993.

Listed below is the monthly cost of the 2009 KTRS MEHP:

Years of Service	KTRS Entry Date Before 07/01/02	KTRS Entry Date on or After 07/01/02	KTRS Entry Date on or After 07/01/08	
5-9.99	\$213.75	\$256.50	Not Eligible	<b>\$285</b>
10-14.99	\$142.50	\$213.75	Not Eligible	
15-19.99	\$71.25	\$156.75	\$156.75	
20-24.99	\$0.00	\$99.75	\$99.75	
25-25.99	\$0.00	\$28.50	\$28.50	
26-26.99	\$0.00	\$14.25	\$14.25	
27 or more	\$0.00	\$0.00	\$0.00	

If you have any additional questions, please contact KTRS at 1-800-618-1687.